



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
20858

DEPOSIT ACCOUNT
NO. 08-2525
OUR ORDER NO. 5668

In re Application of		Hebeisen et al.	
Application Number		10/092,751	Filed
For		PIPERAZINE DERIVATIVES	
Group Art Unit	1624	Examiner	Bernhardt, Emily B.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) (\$110.00) \$ _____
- ☒ Two months (37 CFR 1.17(a)(2)) (\$420.00) \$ 420.00
- ☐ Three months (37 CFR 1.17(a)(3)) (\$950.00) \$ _____
- ☐ Four months (37 CFR 1.17(a)(4)) (\$1480.00) \$ _____
- ☐ Five months (37 CFR 1.17(a)(5)) (\$2010.00) \$ _____
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-2525.
- I have enclosed a duplicate copy of this sheet.
- I am the ☐ applicant/inventor
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

August 18, 2004

Date


Signature

Eileen M. Ebel

Typed or printed name

08/20/2004 H01UTEMA1 00000031 082525 10092751

03 FC:1252 420.00 DA

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



In re Patent Application

Paul Hebeisen, Patrizio Mattei, Marc Muller,
Hans Richter, Stephan Roeber, Sven Taylor

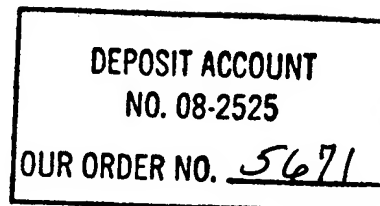
Hoffmann-La Roche Inc.
340 Kingsland Street
Nutley, NJ 07110
August 18, 2004

Serial No.: 10/092,751

Filed: March 7, 2002

For: **PIPERAZINE DERIVATIVES**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Sir:

Transmitted herewith is an amendment in the above-identified application.

_____ page(s) of substitute Sequence Listing.

_____ computer disk(s) containing substitute Sequence Listing.

_____ Statement under 37 CFR §1.825(b) that the computer disk and paper copies of the substitute Sequence Listing are the same.

_____ Statement under 37 CFR §1.825(a) that the substituted Sheets of the Sequence Listing are supported in the application.

_____ No additional fee is required.

 X Petition for an extension of time under 37 CFR §1.136.

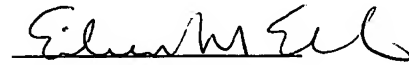
(Col. 1)		(Col. 2)	(Col. 3)		
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE
TOTAL 41	MINUS	34	7	x \$18	126
INDEP. 4	MINUS	3	1	x \$86	86
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 290	
TOTAL					\$212

Serial No.
Filed:

 X Please charge my Deposit Account No. 08-2525 in the amount of \$ 212.00. This sheet is provided in duplicate.

 A check in the amount of \$ is attached.

 X The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 08-2525. This sheet is provided in duplicate.



Attorney of Record

Eileen M. Ebel

(Reg. No. 37316)

Telephone: (973) 235-4391

Telefax: (973) 235-2363

145103